



SCFAC State Consumer and Family Advisory Committee

2009 LCFAC to SCFAC Survey Response Report

SCFAC to LCFAC Interface Task Team

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§ 122C-171. State Consumer and Family Advisory Committee (SCFAC)

The State CFAC shall be a self-governing and self-directed organization that advises the Department and the General Assembly on the planning and management of the State's public mental health, developmental disabilities, and substance abuse services system.

SCFAC RESPONSIBILITIES

- Review, comment on, and monitor the implementation of the State Plan for Mental Health, Developmental Disabilities, and Substance Abuse Services.
- *Identify service gaps and underserved populations.*
- *Make recommendations regarding the service array and monitor the development of additional services.*
- Review and comment on the State budget for MH/DD/SA services.
- Participate in all quality improvement measures and performance indicators.
- *Receive the findings and recommendations by local CFACs regarding ways to improve the delivery of MH/DD/SA services.*
- *Provide technical assistance to local CFAC's in implementing their duties.*

TECHNICAL ASSISTANCE

DEFINITION:

“Information, support, referrals, resources and training provided to Local CFAC’s by the State CFAC in a variety of ways as determined by the SCFAC based on information received from the State and Division of MH/DD/SA Services or from communications from the Local CFAC’s.”

LCFAC to SCFAC Survey

In May 2009, the SCFAC distributed an online questionnaire utilizing a program called “Survey Monkey”. There are currently 24 LCFAC’s across the state of NC. The SCFAC received 22 completed surveys from LCFAC’s.

The following responses were taken directly from the 2009 LCFAC to SCFAC Survey and were edited for grammar, punctuation, length not affecting original content.

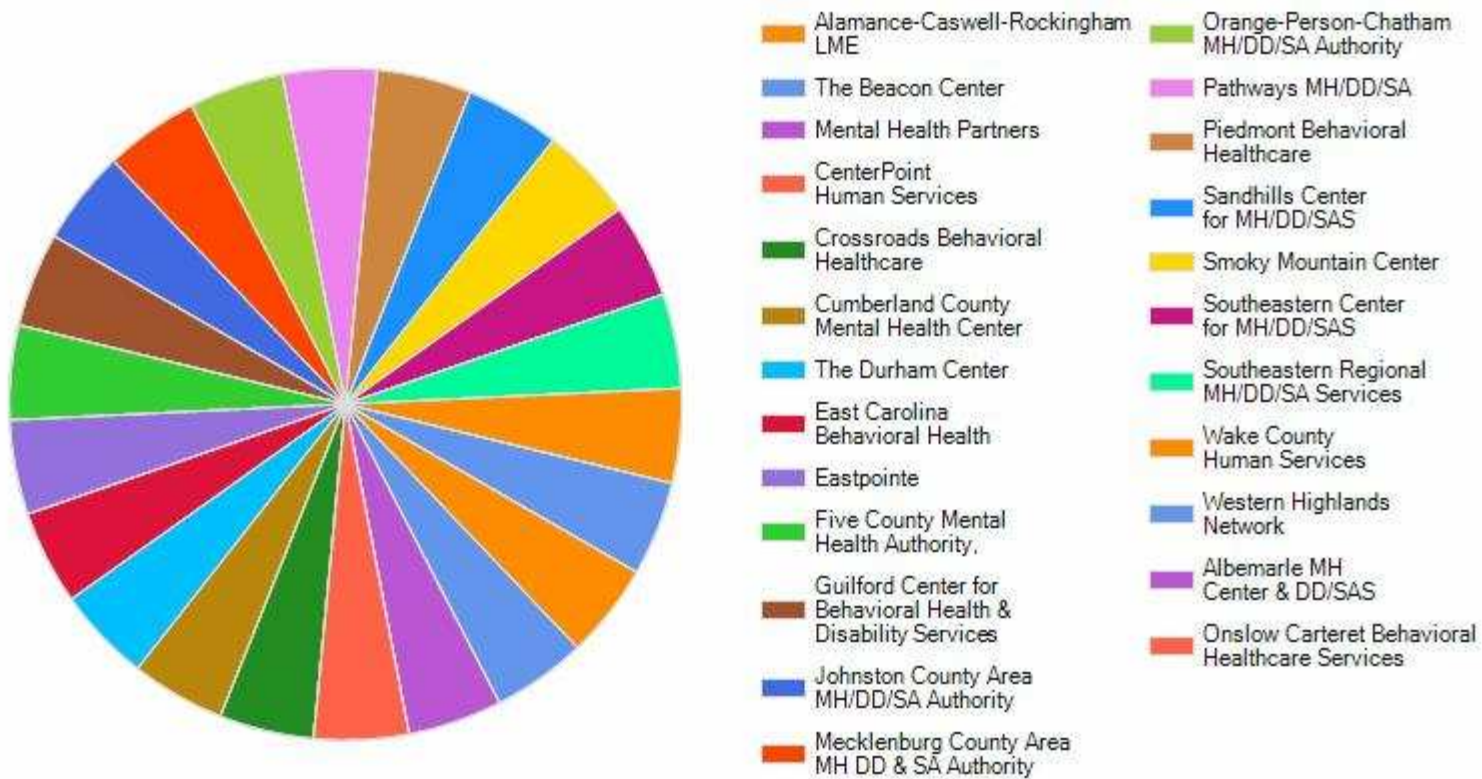
LCFAC's Represented:

- **Alamance-Caswell-Rockingham LME**
- **The Beacon Center Mental Health Partners**
- **Center Point Human Services**
- **Crossroads Behavioral Healthcare**
- **Cumberland County Mental Health Center**
- **The Durham Center**
- **East Carolina Behavioral Health**
- **Eastpointe**
- **Five County Mental Health Authority**
- **Guilford Center for Behavioral Health & Disability Services**
- **Johnston County Area MH/DD/SA Authority**
- **Mecklenburg County Area MH DD&SA Authority**
- **Orange-Person-Chatham MH/DD/SA Authority**
- **Pathways MH/DD/SA**
- **Piedmont Behavioral Healthcare**
- **Sandhills Center for MH/DD/SAS**
- **Smoky Mountain Center**
- **Southeastern Center for MH/DD/SAS**
- **Southeastern Regional MH/DD/SA Services**
- **Wake County Human Services**
- **Western Highlands Network**
- **Mental Health Partners**

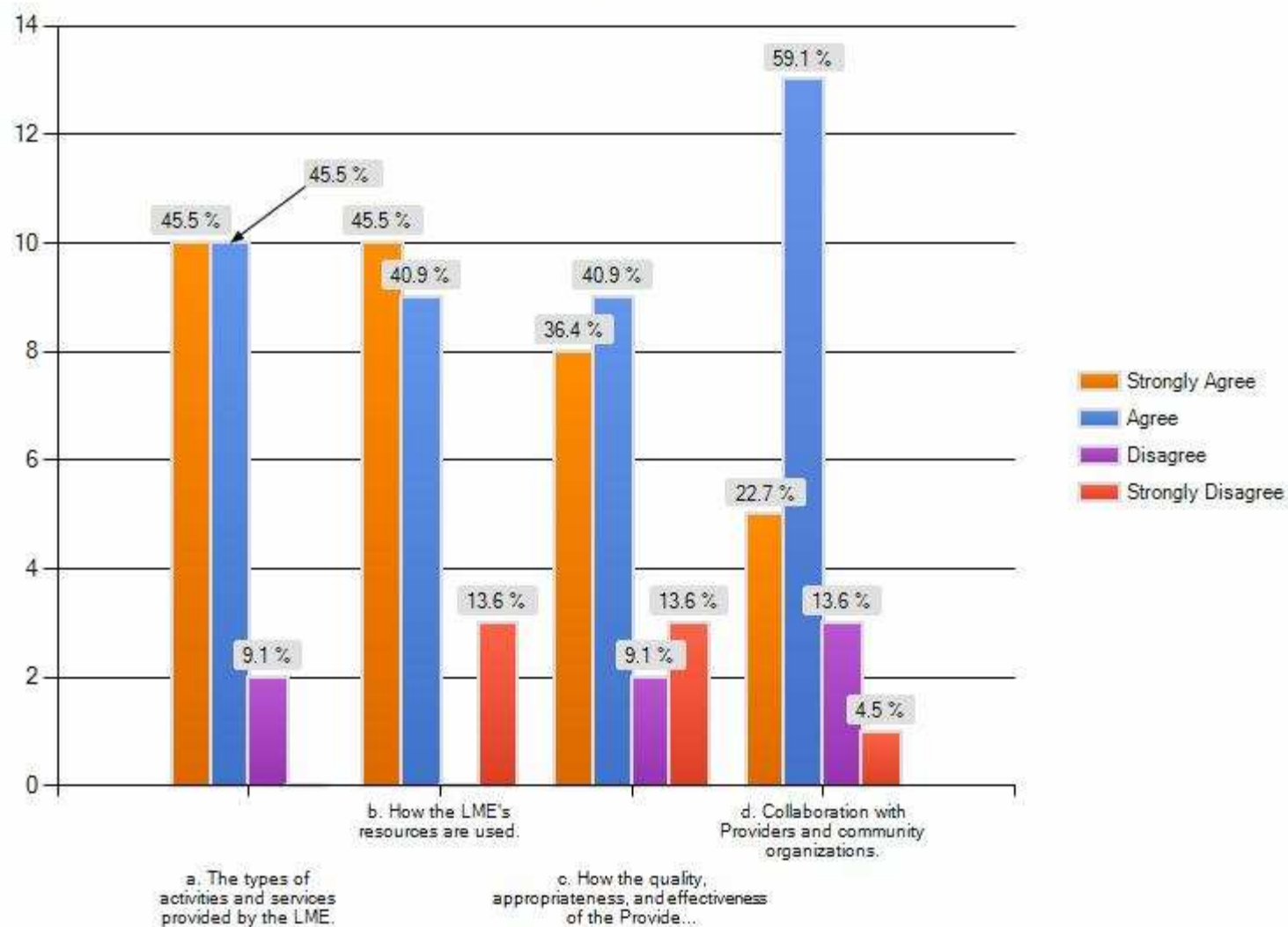
LCFAC's Not Represented:

- **Albemarle MH Center & DD/SAS**
- **Onslow Carteret Behavioral Healthcare Services**

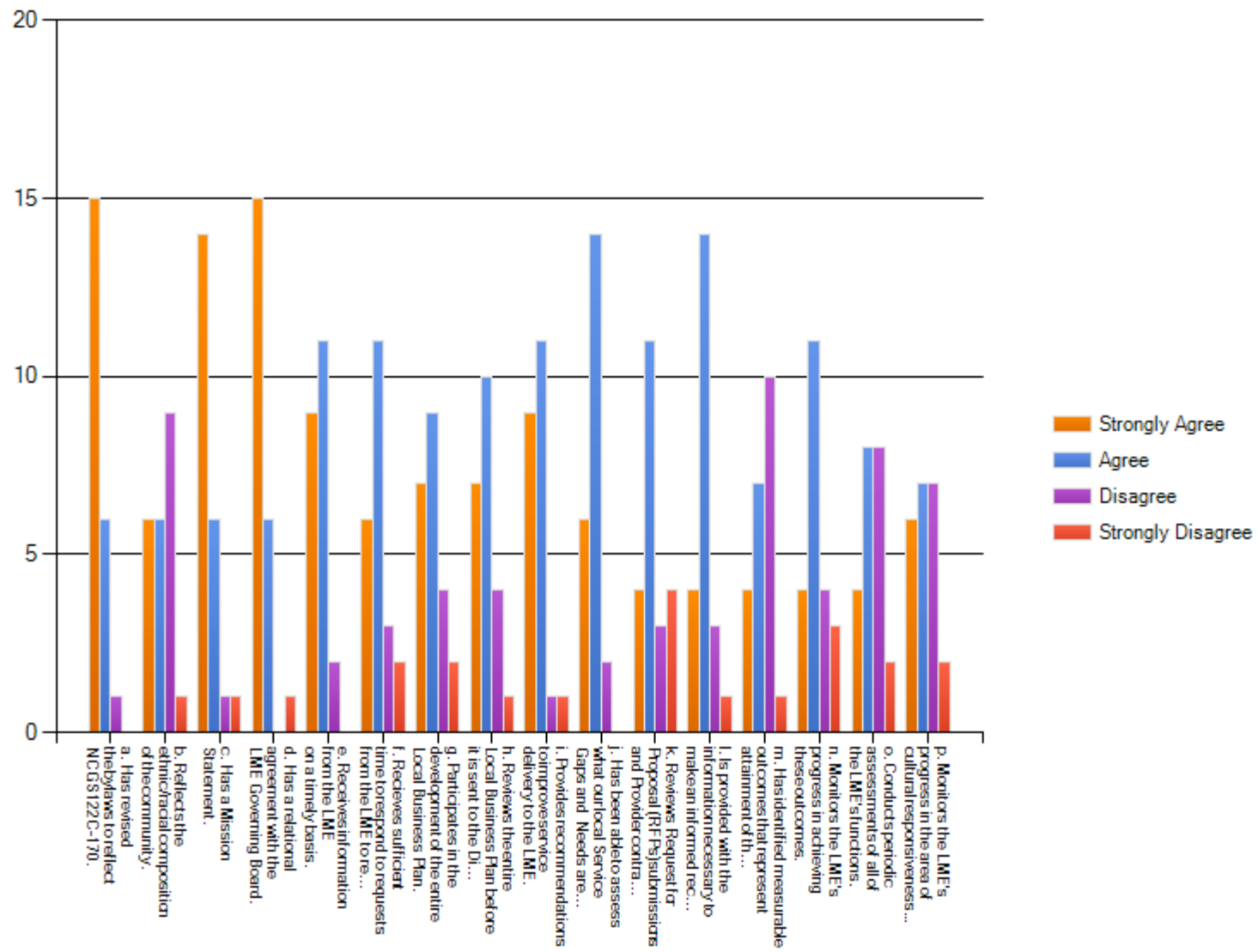
LCFAC's



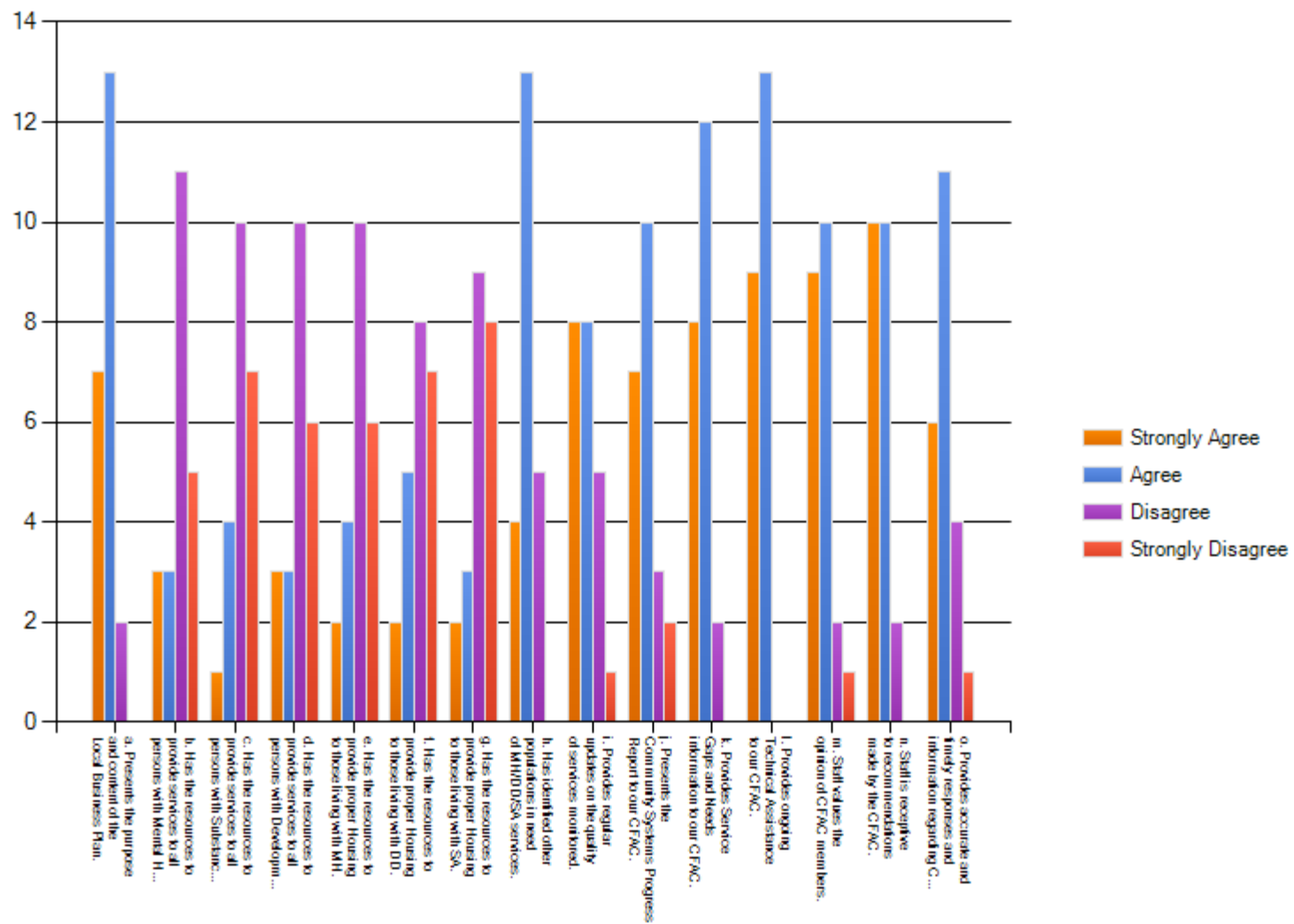
CFAC Members Give Input On:



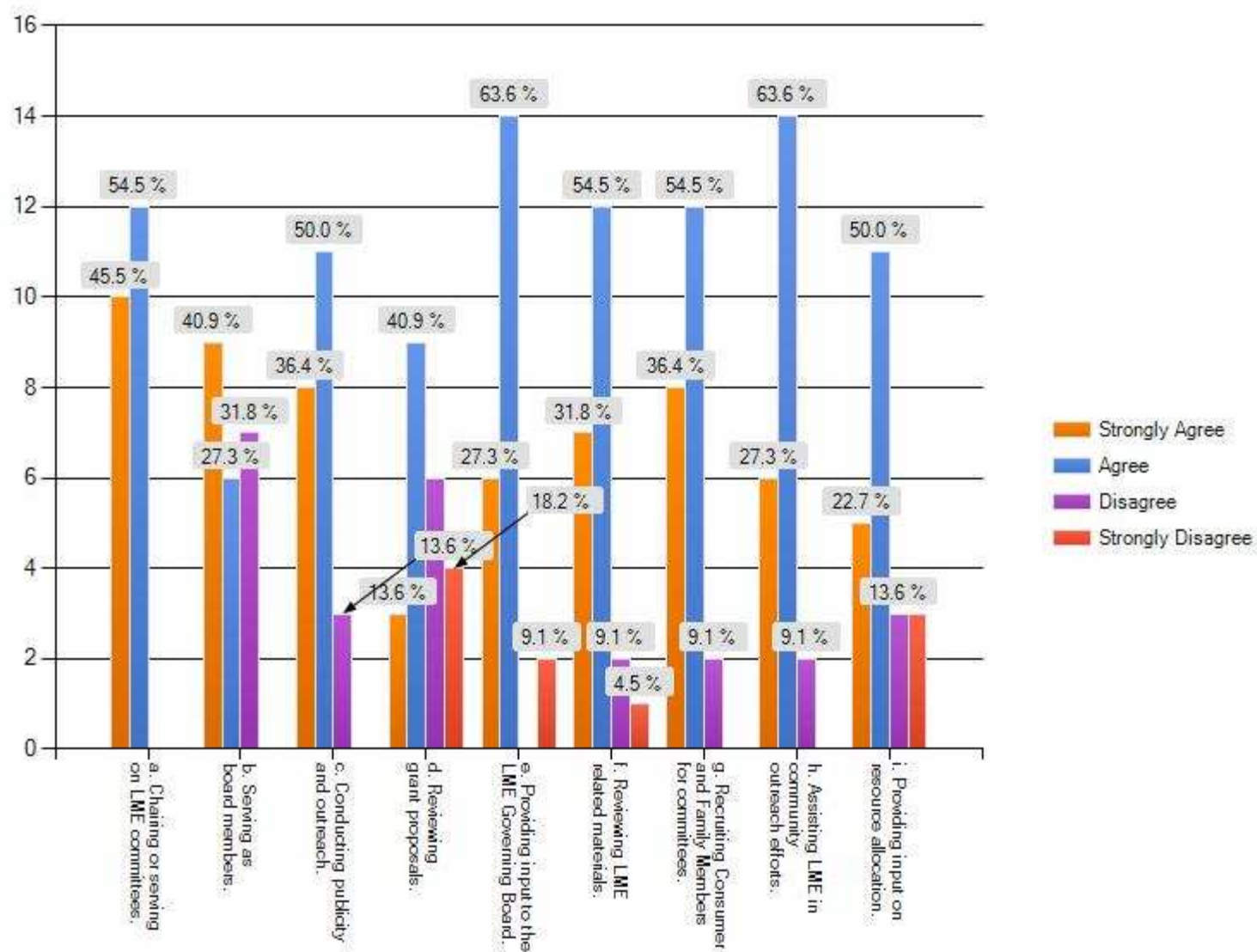
Our CFAC:



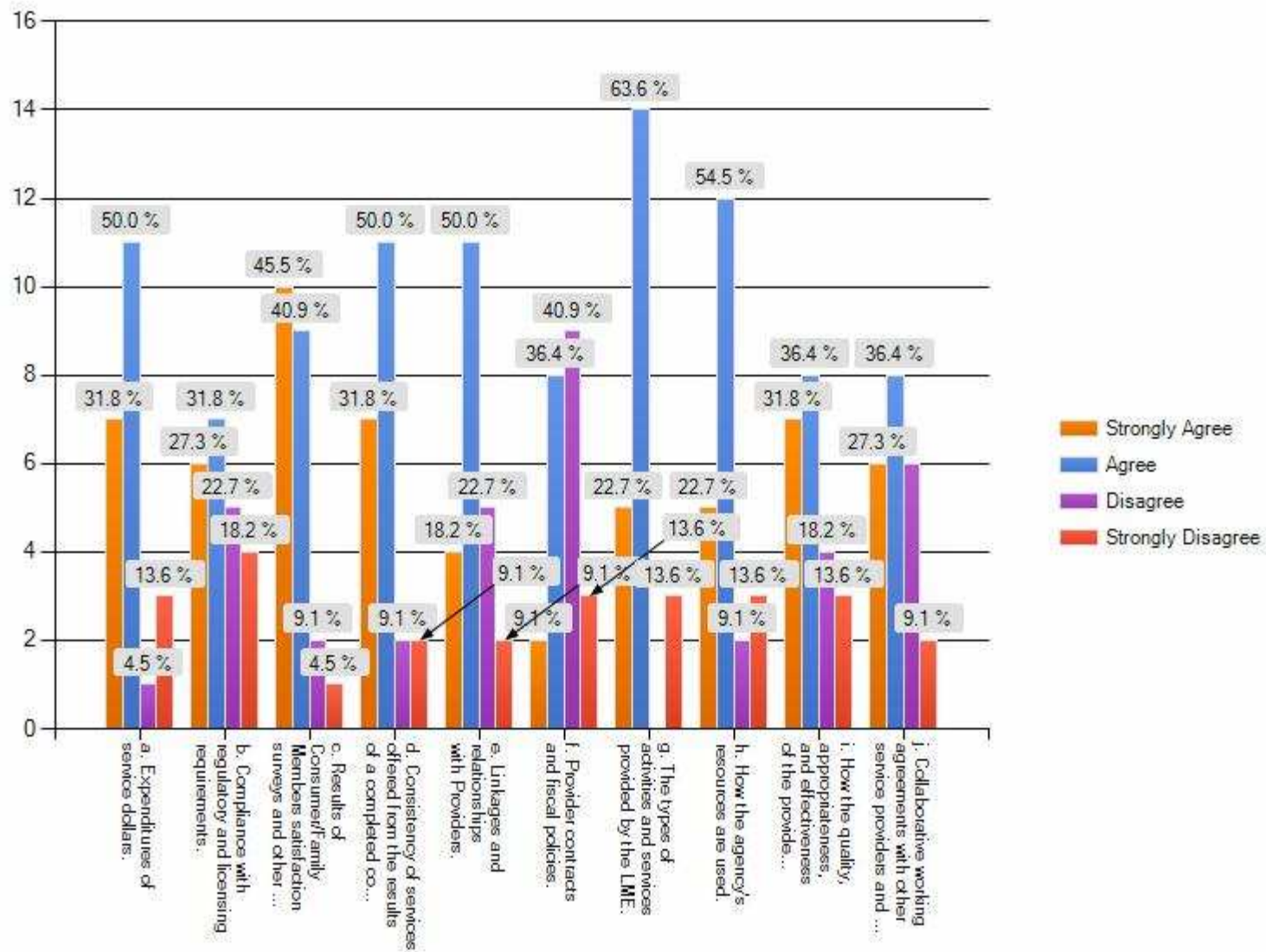
Our LME's:



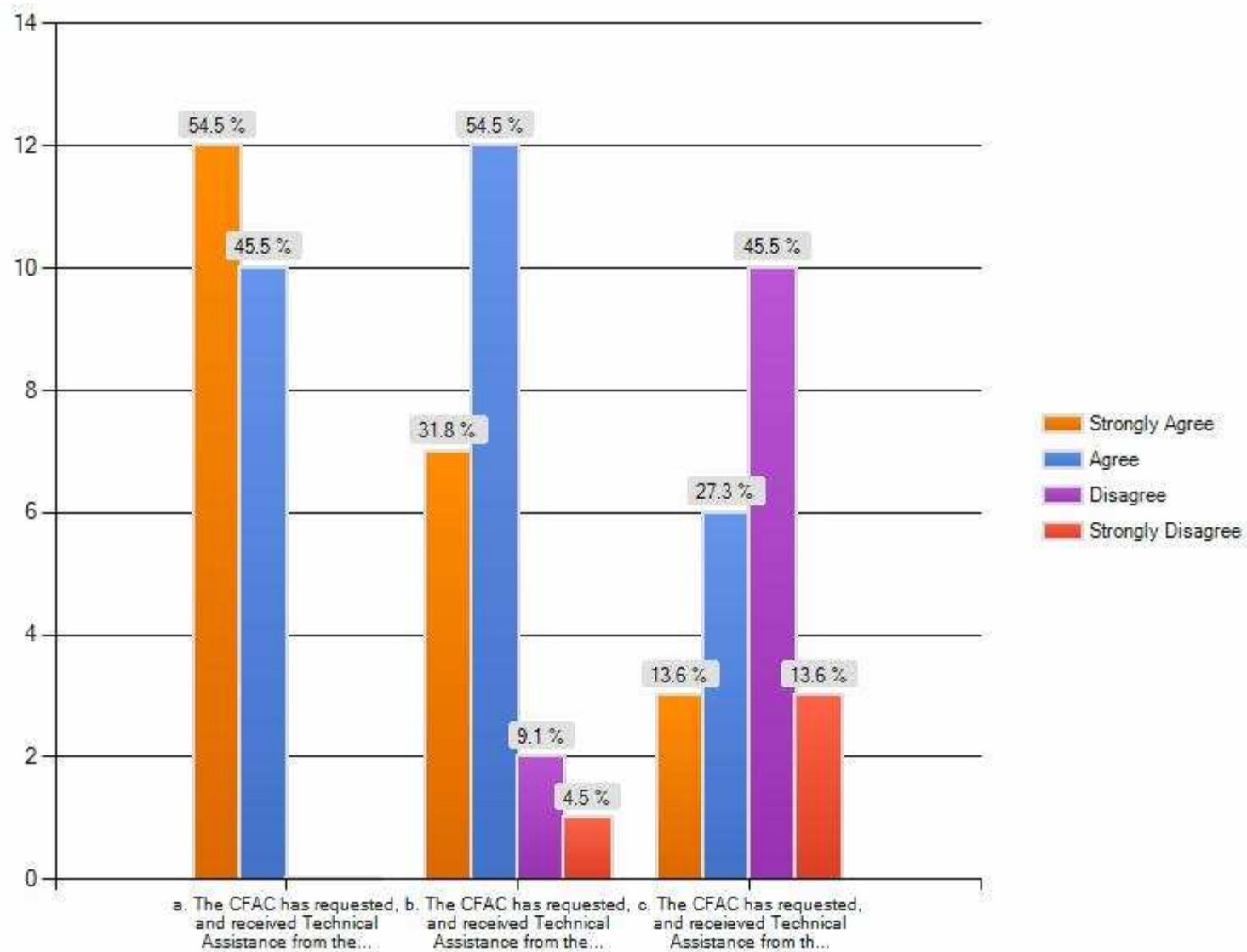
Consumers / Family Members are involved in leadership roles in the LME



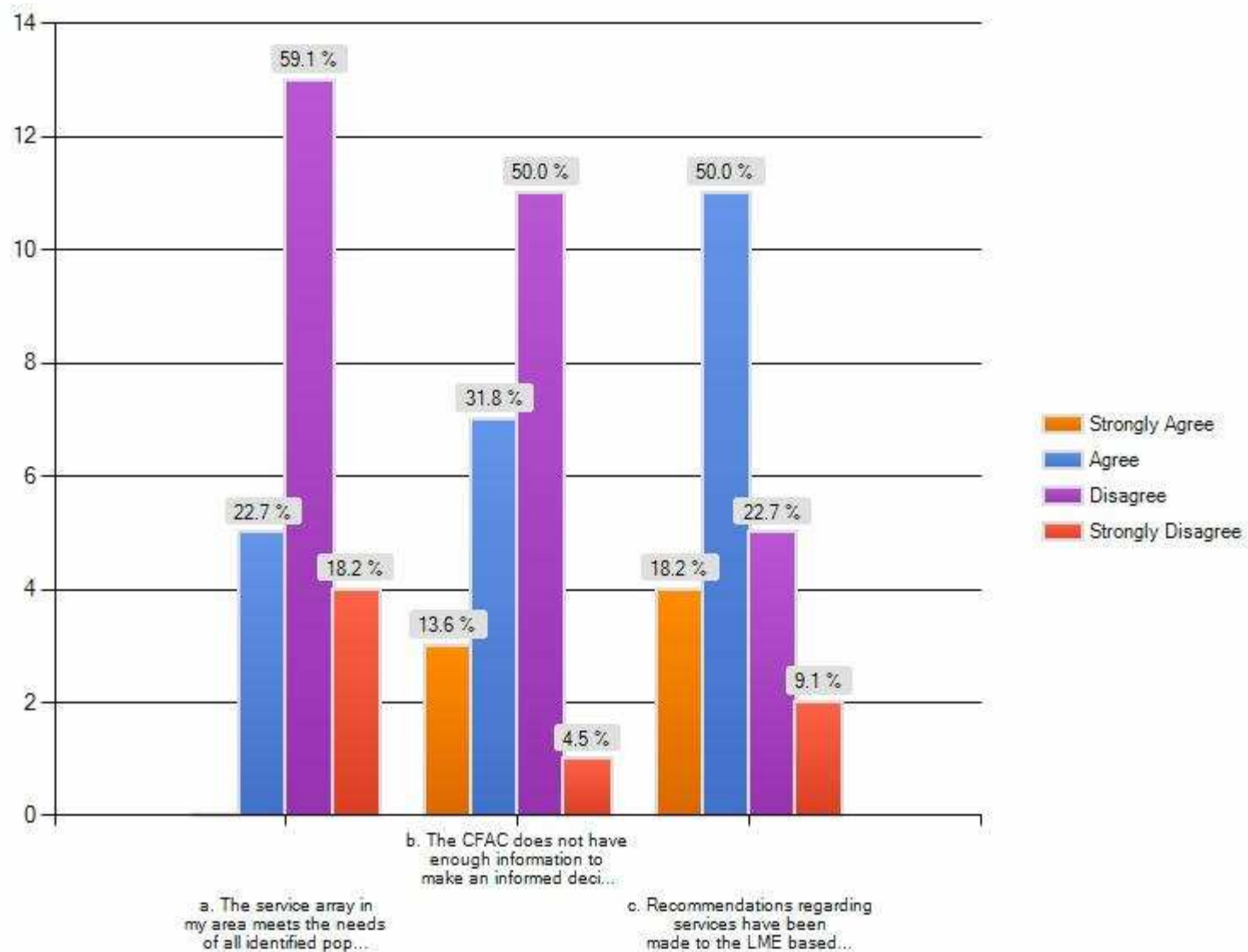
Our CFAC annually reviews and gives input on:



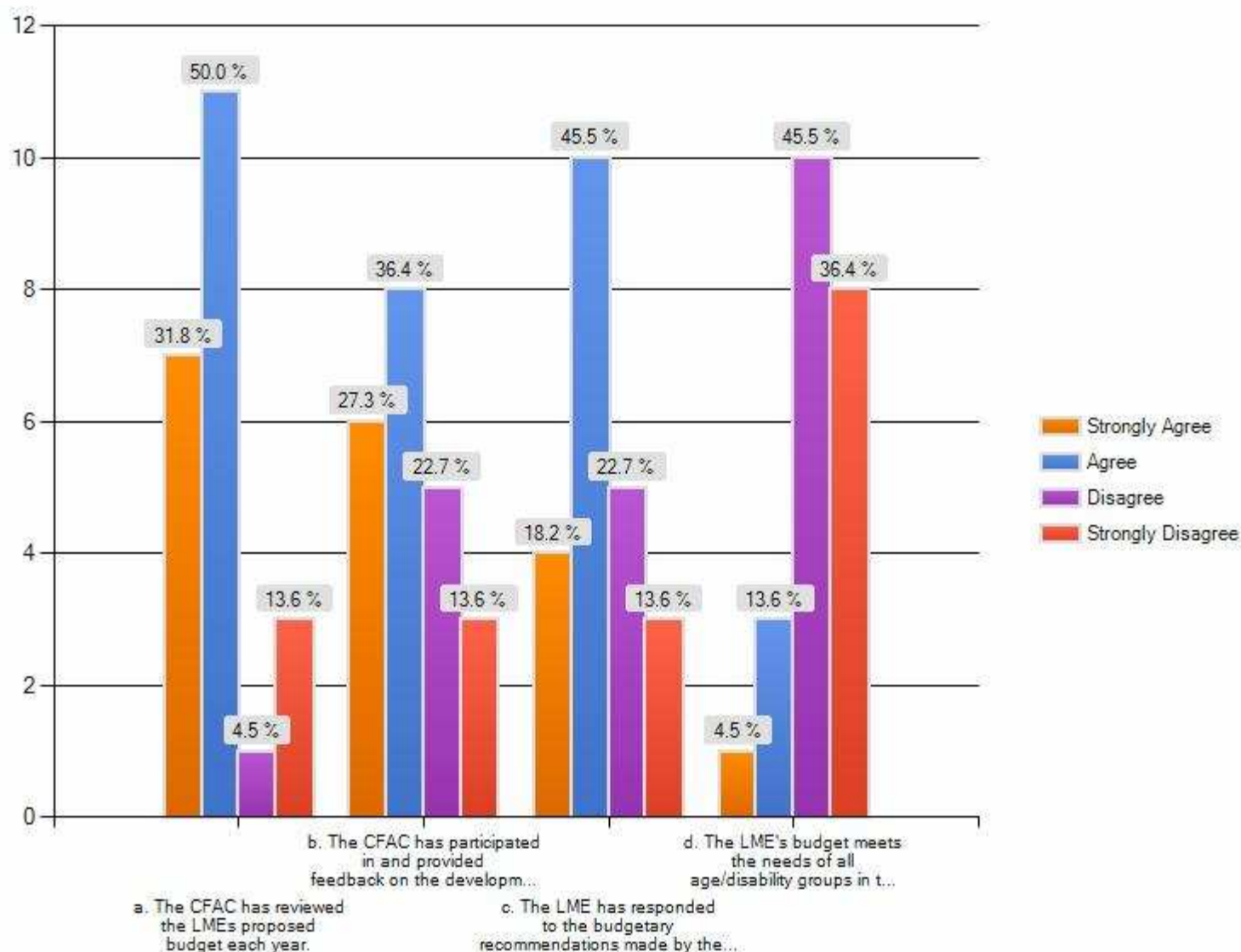
Technical Assistance to Local CFAC's:



Service Array, Monitoring, and Development of New Services



Budget for Mental Health, Developmental Disabilities and Substance Abuse Services



TOP 5 RECOMMENDATIONS

- SERVICES
- GAPS
- HOUSING
- PROVIDER
- TRANSPORTATION

TOP 5 RECOMMENDATIONS

#1 – SERVICES

- **Service array does not meet the needs of all identified population groups.**
- **Improve the availability and quality of outpatient mental health and substance abuse services.**
- **Increase quality programs and slots for all populations to facilitate and maintain independence based on individual needs.**
- **Quality and timeliness of services is vital and needs to be a priority when establishing LME goals as it enables inclusion for people with disabilities into the fabric of everyday life, creating a more vibrant, inclusive, and interdependent community as a whole.**
- **Improve Service Quality through workforce development projects and provide SCFAC / LCFAC's with written reports quarterly on progress.**
- **Equal, consistent MH/DD/SA services.**
- **Keep Community Support Services in NC.**

TOP 5 RECOMMENDATIONS

#1 – SERVICES (cont'd)

- Assign specific accountability within the Division for each of the 2007 Strategic Objectives and require quarterly reporting to SCFAC and local CFAC's on actions and status.
- Improve collaboration between Division and Lime's.
- When appropriate-quality case management.
- Cap waiting list.
- Keep Wright School & Level III & IV Group Homes.
- More concern from state govt. for local issues.
- Privatized Services have not been the answer to improved services for the populations we are supposed to serve. The "REFORM" process has added another layer of overhead. We have one layer with the LMEs and another with the 100's of Service Providers.

TOP 5 RECOMMENDATIONS

#2 – GAPS

- **Identify minorities and youth.**
- **Dual diagnosis services.**
- **Increased transition services from school to work and / or life for all populations.**
- **Assistance with affordable medications.**
- **Develop and provide funding for Peer Support Services.**
- **Increased peer support use.**

TOP 5 RECOMMENDATIONS

#2 – GAPS (cont'd)

- **Adolescent services-acute and into adulthood.**
- **Increased availability of clinical services to Hispanic / Latino consumers.**
- **Expansion of Jail Diversion Services.**
- **Recreation and leisure opportunities for people with disabilities which is imperative to good mental health. Overall well-being is undervalued and under funded in our communities.**

TOP 5 RECOMMENDATIONS

#3 – HOUSING

- More affordable housing needs to be a top priority as housing is grossly inadequate to meet the needs of people with disabilities.
- SA Housing and SA Halfway Housing for women with children.
- Affordable, supported housing (apartments that include apartment clusters, transitional housing, group homes, etc.) with 24 hour supervision that would be handicap accessible, etc.

TOP 5 RECOMMENDATIONS

#4 – PROVIDERS

- **Quality of Providers.**
- **Increase availability of psychiatrists and therapists in rural areas.**
- **Need more psychiatrists in the state.**
- **Mandate accuracy of provider reporting.**
- **Insufficient number of providers with sign language proficiency.**
- **Ongoing, affordable training for providers**

TOP 5 RECOMMENDATIONS

#5 – TRANSPORTATION

- **Increased affordable and reliable transportation options: 24/7 transportation that would be available to help transport individuals to appointments, shopping, work integration (some jobs are after 5 p.m.) particularly needed in rural areas.**
- **Transportation for people with disabilities is inconsistent, ranging from some service to no service, and is important to the basic needs of Consumers.**

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Next Steps:

- **Send 2009 LCFAC to SCFAC Survey Response Report to LCFAC's and LME's, General Assembly, LOC, and Secretary Cansler.**
- **Identify LCFAC's with "Disagree / Strongly Disagree".**
- **Refer concern to LME, Consumer Empowerment Team, SCFAC accordingly.**
- **Address concerns as determined by SCFAC's "technical assistance" definition.**
- **Recommend LCFAC's take recommendations to LME to fulfill statutory responsibilities.**
- **Make recommendations to General Assembly / LOC and Division of MH/DD/SA Services based on survey findings to fulfill statutory responsibilities.**